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PTO/SB/01 (10-01)

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	P05375US1
First Named Inventor	FARRELL, DAVID H.
COMPLETE IF KNOWN	
Application Number	10 / 006,403
Filing Date	December 5, 2001
Art Unit	1632
Examiner Name	

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name #3

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

A MONOCLONAL ANTIBODY-BASED DIAGNOSTIC ASSAY FOR GAMMA FIBRINOGEN

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(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) 12/05/2001 as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR : A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) David H.

Family Name
or Surname Farrell

Inventor's Signature


Date 12/14/01

Residence: City	University Park	State	PA
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Country	USA	Citizenship	USA
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Mailing Address c/o The Pennsylvania State University, 113 Technology Center, 200 Innovation Blvd.

City	University Park	State	PA
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ZIP	16802-7000	Country	USA
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NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Hamid A.

Family Name
or Surname Al-Mondhiry

Inventor's Signature

Date

Residence: City	University Park	State	PA
-----------------	-----------------	-------	----

Country	USA	Citizenship	USA
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Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
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NAME OF SOLE OR FIRST INVENTOR :

A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any])

David H.

Family Name
or Surname

Farrell

Inventor's
Signature

Date

Residence: City

University Park

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Citizenship USA

Mailing Address

c/o The Pennsylvania State University, 113 Technology Center, 200 Innovation Blvd.

City

University Park

State

PA

Country

ZIP 16802-7000

Country

USA

NAME OF SECOND INVENTOR:

A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any])

Hamid A.

Family Name
or Surname

Al-Mondhiry

Inventor's
Signature

Date 12-14-01

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First Named Inventor	FARRELL, DAVID H.
Group Art Unit	1632
Examiner Name	
Attorney Docket Number	P05375US1

I hereby appoint:

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OR
 Practitioner(s) named below:

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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Address			
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I am the:

Applicant/Inventor.

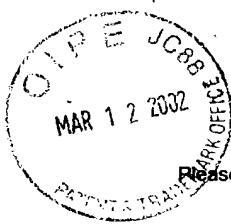
Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	David H. Farrell
Signature	
Date	12/14/01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*

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Group Art Unit	1632
Examiner Name	
Attorney Docket Number	P05375US1

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Telephone	Fax		

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Hamid A. Al-Mondhiry		
Signature			
Date	12-14-01		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.			
<input checked="" type="checkbox"/> *Total of 2 forms are submitted.			

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